Self-insured

Summary of change lists

2021 Advanced Control Formulary



Advanced Control - April 1, 2021 updates

There will be changes to the Advanced Control drug list that applies to your plan starting April 1, 2021. It's important that you review and understand the changes in the chart below. Talk to your health care provider about how these changes might impact you.

What if I need a prescription drug that requires a medical exception?

You or your prescriber can request a medical exception to the changes in this letter. If you would like to ask for a medical exception, speak directly with your prescriber or you can call us at the toll-free number on your member ID card.

We'll contact you and your prescriber with our decision. If your exception is approved, you only need to pay your plan copay or cost-share. This amount is based on your pharmacy plan design.

How to find a preferred medicine that's right for you

You can visit the website that's on your member ID card and sign into your account.

Key	
UPPERCASE	Brand-name medicine
lowercase italics	Generic medicine

Drugs moving from not covered to covered status

Disease state	Drug name
Gastrointestinal	ASACOL HD

Drugs moving from preferred to non-preferred (Tier 3 to Tier 2) status

Disease state	Drug name
Gout	MITIGARE
Menopause	VAGIFEM

Drugs moving from preferred to non-preferred (Tier 2 to Tier 3) status

Disease state	Drug name	Alternative(s)
Cancer	TYKERB	lapatinib
HIV	ATRIPLA, SYMFI, SYMFI LO	efavirenz-emtricitabine-tenofovir disoproxil fumarate, efavirenz- lamivudine-tenofovir disoproxil fumarate, BIKTARVY, DOVATO, GENVOYA, ODEFSEY, SYMTUZA, TRIUMEQ

Drugs moving from covered to not covered status

Disease state	Drug name	Alternative(s)
ADHD	ADDERALL	dexmethylphenidate, dextroamphetamine, methylphenidate
	FOCALIN XR	amphetamine-dextroamphetamine mixed salts ext-rel (excluding certain NDCs), dexmethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel (excluding certain NDCs), MYDAYIS, VYVANSE
Anticonvulsants	BANZEL SUSPENSION	clobazam, clonazepam, lamotrigine, rufinamide, topiramate, TROKENDI XR
	topiramate ext-rel sprinkle capsule (generics for QUDEXY XR only)	carbamazepine, carbamazepine ext-rel, clobazam, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, rufinamide, tiagabine, topiramate, valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI
Antidepressants	ZOLOFT	citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX
Asthma	zileuton ext-rel tablet 600mg	montelukast, zafirlukast
Cholesterol	fenofibrate tablet 40mg, fenofibrate capsule 50mg, 130mg	fenofibrate (except fenofibrate capsule 50 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg), fenofibric acid delayed-rel
Contraceptives	YASMIN	ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone- levomefolate, ethinyl estradiol-norethindrone acetate-iron
Diabetes	GUARDIAN CONTINUOUS GLUCOSE MONITORING SYSTEM, All other continuous glucose monitoring systems that are not DEXCOM brand	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
Dermatologic	clocortolone pivalate cream 0.1%, desoximetasone oint 0.05%, hydrocortisone butyrate lotion 0.1%, triamcinolone acetonide oint 0.05%	hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)
Eye Disorders	TRAVATAN Z	latanoprost, travoprost, ZIOPTAN
Gastrointestinal	hyoscyamine tablet ext-rel 0.375 mg, SYMAX-SR, OSCIMIN SR	dicyclomine, hyoscyamine sulfate, hyoscyamine sulfate orally disintegrating tablet
	pantoprazole delayed-rel suspension	esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel tablet, DEXILANT
High Blood Pressure	AZOR	amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan
	COZAAR, MICARDIS	candesartan, irbesartan, losartan, olmesartan, telmisartan, valsartan
	HYZAAR, MICARDIS HCT	candesartan-hydrochlorothiazide, irbesartan-hydrochlorothiazide, losartan-hydrochlorothiazide, olmesartan-hydrochlorothiazide, telmisartan-hydrochlorothiazide
	ZESTORETIC	fosinopril-hydrochlorothiazide, lisinopril-hydrochlorothiazide, quinapril-hydrochlorothiazide
Hormone Replacement	ANDROGEL 1.62%	testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM

Drugs moving from covered to not covered status (continued)

Disease state	Drug name	Alternative(s)
Infection	nitrofurantoin suspension (NDC 70408023932)	nitrofurantoin (except NDC 70408023932)
	Doxycycline hyclate delayed-rel tab 50mg	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline
Migraine	MAXALT, MAXALT MLT	eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, REYVOW, UBRELVY, ZOMIG NASAL SPRAY
Nerve Pain	LYRICA	duloxetine, pregabalin
Pulmonary Arterial Hypertension (PAH)	REMODULIN	treprostinil
Thyroid Supplement	CYTOMEL	levothyroxine, liothyronine
Women's Health – Menopausal Vasomotor Symptoms	paroxetine mesylate capsule 7.5mg	paroxetine HCl

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